G. R. S. App. F. IX-4]

1943 -44.

File No. 66-43.

Previous Reterences.

(War)

Serial Nos. 5 & 6.

Later References.

(1")

GENERAL AND REVENUE SECRETARIAT

Serial Nos. Two only.

Part B for November 1943.

SUBJECT.

Compensation to the dependants of Indian Seamen killed by enemy action.

Appl Krishnan
10.XI.43.

5 From The Asst to the Hon'ble the Revenue Member No F. 743/W dated 20th Oct 40 requesting to send enquiries to trace the dependants of late Mr. S. Salem Deck.

The address furnished does not seem to be correct. Submitted for orders whether this may be returned to the Regr for furnishing correct address or to which of the DCs this may be sent for verification

Please see from the Gazetteer
guide if there is any place like
Ariyanur
The
There is a place of Name Ariyanur in Salem as per from the Postal Guide. Submitted for orders.

The Collector may enquire whether there is any D.O. in Name of Name & that the correct name may be furnished to facilitate the enquiry

The
28/10

Submitted with a draft.

The
Issue Pd. 822 dated 27th Oct 40 to the Regr

TYPING SECTION
27 OCT. 1943

W66-43-2

No.F.7-42/W.(Wir Cases)

From - The Secretary to the non'ble
the Resident in Mysore. 963

To - The Chief Secretary to the
Government of His Highness
the Maharaja of Mysore.

Bangalore, 20th October 1943.

Compensation to dependants of Indian seamen killed by enemy action on board the S.S."Hoi How"- Deck Topass Salimut Karpa.

Sir,

I am directed to forward a copy of a letter from the Shipping Master, Bombay, No.W/125/7449 of 1943, dated the 14th October 1943, with enclosures. I am to request that enquiries may kindly be made to trace the dependants of the missing seaman and that after investigation the forms may kindly be completed by his heirs and returned to this Residency with the particulars required.

2. The favour of an early reply is requested.

Proforma

I have the honour to be,
Sir,
Your most obedient servant,

for SECRETARY TO THE RESIDENT.

Fr. Copy of a letter from the Shipping Master, Bombay, No.M/125/7449, of 1943, dated the 14th October 1943.

Re: Compensation to dependants of Indian seamen killed by enemy action - SS ."Hoi How" - Salimut Karpa, D.K.Toppass.

. . . . .

I have the honour to state that the above named seaman has been reported missing when the s.s."Hoi How" was subjected to enemy action. His dependants are therefore entitled to compensation under the War Pensions & Detention Allowances (Indian seamen etc.) Scheme of his Majesty's Government.

A detailed report regarding the dependants of the seaman including his wife and children under fourteen years of age may please be furnished to this office. In this connection, I request you to have the enclosed forms M.P.B.406(I) completed in duplicate by the claimants - wife in the first instance - and forward them to this office together with the observations of the Investigating Officer on the following points for submission to the Govt. of India.

i. Names of the dependants and their ages;
ii. degree of their dependency upon the seaman;
iii. their means of living and monthly income, and
iv. in case a claim is made on account of infirmity it should be supported by a certificate signed by a Medical Officer holding the rank of that of the Civil Surgeon.

Further 1 application form E 1. for compensation for war damage effects are enclosed for completion by the legal heirs of the seaman. This form may please be returned on completion duly attested by a Magistrate and accompanied by a declaration made before him of the articles lost and the value of each such article. On receipt of the form, compensation amount according to the Government Scheme will be forwarded to you for disbursement.

An early compliance is requested.

The name and address of next of kin are as follows:-

Wife/- Kalpa,
At & P.O.Aryanoor, Supraval,
Odyarpolan, Mysore.

COMPENSATION FOR WAR DAMAGE TO EFFECTS.

(See Board of Trade Notice No. M. 172)

FORM OF CLAIM

(To be used only by persons to whom the maximum compensation payable is £20 or less and only if all effects lost.)

(If Declaration A does not apply, Declaration B should be completed.)

*Full name in block letters.

A. I*.....declare that on the.....day of.....Saimust Marpa.....I sustained war damage to ~~my~~ his effects, involving the loss of the whole of them, to the value of Rs.....while ~~I~~ he was in the service of the s.s. "..... Hoi Hoan ....."

I also declare that I have made no other claim in respect of the loss, and that none of my said effects has been replaced out of public funds.

†State cause of damage, e.g., torpedoing, bombing, etc.

The war damage was caused by †...Enemy action.....

B. In the following circumstances and from the following causes:—

(i) (State where and how the effects were lost, e.g., proceeding to or from ship, giving name of ship, method of travel and place of damage)

.....

.....

Section B to be filled in if Section A is not applicable.

(ii) (Cause of damage—bombing, torpedoing, etc.).....

.....

I also declare that I have made no other claim in respect of the loss and none of my said effects has been replaced out of public funds except (if any such replacements have been made, full details must be given overleaf).

Port at which payment is desired.....

Signature of Claimant.....

‡To be inserted by ratings in the Stewards or Cooks Deptts.

Rank or Rating ~~of~~ the Seaman ‡Rate of wages in Agreement.....

Dk Topass

Address.....

Date.....

I hereby certify to the best of my knowledge and belief that the above-mentioned (name).....

.....employed as (grade or rating).....

.....in the (name of vessel).....

§Applicable for ratings in the Stewards or Cooks Deptts. only.

§at the rate of wages stated above, and sustained war damage to effects in the circumstances and from the causes stated above.

Signature of *Owner* / *Master or* / *Senior Available Officer* .....

To Superintendent,

M.M.O.....Date.....

I hereby certify that the sum of Rs.....has this day been paid to the above-mentioned ¶.....

¶Full name and rank or rating.

.....in settlement of his claim to compensation for war damage to his effects, involving the loss of the whole of them and that his receipt for the same has been obtained and attached to my schedule 80 for the month of.....

Signature of the Superintendent.....

Date.....

M.M.O. Stamp.

M. P. B. 406

BRITISH MERCANTILE MARINE-INDIAN AND OTHER NATIVE PERSONNEL.

Application for pension by widow or dependant of a seaman whose death occurred as a result of war injurie detention.

WARNING :—ANY PERSON KNOWINGLY MAKING A FALSE DECLARATION WILL BE LIABLE TO PROSECUTION.

1. Name of vessel on which deceased seaman was serving when killed or injured.

2. Name and address of Owners of vessel. S.S. "Hoi How" M/S Butterfield & Swire (India) Ltd. Bombay.

3. Full name of deceased seaman. (BLOCK LETTERS) SALIMUT KARPA

4. Rating. Dk. Topass

5. Age of deceased seaman at time of death. 48 Years

6. Nationality. British Indian

7. Home address of deceased seaman. At- Aryanoor, Suprawal, P.O. Aryanoor, Odyarpalan, Mysore.

8. Date and place of death. At Sea

9. Cause of death. Enemy action

BLOCK LETTERS Name of Claimant.	Date of Birth.	Relationship to deceased seaman.	Whether remarried and if so, date of remarriage. (for widow only).
1.			
2.			

10. Claimant's address. (BLOCK LETTERS)

11. Amount allowed to you by seaman before his death, and whether weekly or monthly.

12. Whether deceased seaman left any advance or allotment notes in your favour immediately before the commencement of his last voyage, and if so, for how much ?

13. (a) Were you living with your husband prior to the commencement of the war, or immediately prior to the commencement of the voyage or journey during which the fatal accident occurred ? ("Yes" or "No". If "No" state the circumstances.)

(b) Were you being maintained by your husband at the time of his death ?

(c) Particulars of children under 14 years of age.

BLOCK LETTERS Surname.	Other names.	Date of birth.	Sex.
1.			
2.			
3.			
4.			

(The Widow of seaman only.)

14. (a) Are all the children of the deceased seaman maintained by you ?

(b) If not, give particulars.

15. Has the deceased seaman left behind any other widow or widows than ? If so, give particulars.

For Parents or other dependants of seamen only.

16. How far were you dependent on the deceased seaman ? (Wholly, partly, etc.)

17. Have you any other means of support ? If so, give particulars.

18. Is your wife/husband alive and living with you ?

19. (a) Do you claim to be wholly or partly incapable of self-support ?

(b) If so, is the incapacity due to age or infirmity ?

(c) If infirmity, state its nature and attach a medical certificate in support of your claim.

20. Have you or any other member of your family ever claimed or received pension in respect of the deceased ? If so, give particulars.

DECLARATION.

For Widow and other dependants.

I HEREBY DECLARE that to the best of my knowledge and belief the above answers are true and complete and I claim pension/allowance under the appropriate Regulation on the basis of the facts set forth above. I undertake to furnish any further particulars that may be required by the Ministry of Pensions. / Government of India.

For Widow only.

(I ALSO DECLARE that if pension is granted I will at once inform Principal Officer, Mercantile Marine Department,.....if I remarry.)

For Guardian of motherless children only.

I HEREBY DECLARE that to the best of my knowledge and belief the above answers are true and complete and that the child (ren) is/are the child (ren) of the deceased seaman. On behalf of the child (ren) I claim allowances under the appropriate Regulations on the basis of the facts set forth above. I undertake to furnish any further particulars that may be required by the Ministry of Pensions. / Government of India.

I ALSO DECLARE that if allowance is granted I will faithfully administer for the child (ren)'s benefit all moneys paid to me on his/her/their behalf by the Ministry of Pensions / Government of India and that I will at once inform the Principal Officer, Mercantile Marine Department, if the/any child dies or ceases to be within my care.

.....Signature of claimant
(or left thumb impression).

.....Witness to Signature.

.....Address of Witness.

Declared and subscribed before me this day of 194 .

Signature of a Magistrate or Commissioner for Oaths or other District Official.....

.....

Address.....

GENERAL REMARKS BY THE PRINCIPAL OFFICER, MERCANTILE MARINE DEPARTMENT.

Wages of deceased seaman when killed or injured. Rs. 46/- plus Rs. 23/- war risk money p.m.

Customary rates of pay of rating before 1st September 1939. Rs. 23/- p.m.

NOTE.—In the case of widows the birth and marriage certificates and in the case of children, birth certificate should be attached, if available. In other cases certificates proving the relationship (if any) of the Claimant to the deceased should be attached.

Second Signature of Claimant.....

Ministry of Pensions Ref. No.....

Government of India Ref. No.....

PC—S2—II-59—22-7-43—1,000.

Duplicate

M. P. B. 406 (1).

BRITISH MERCANTILE MARINE-INDIAN AND OTHER NATIVE PERSONNEL.

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4. Rating. Dk. Topass

5. Age of deceased seaman at time of death. 48 Years

6. Nationality. British Indian

7. Home address of deceased seaman. At Aryanoor, Supraval,

8. Date and place of death. P.O. Aryanoor, Edyarpolan, Mysore At sea

9. Cause of death. Enemy action

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1.			
2.			

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(b) Were you being maintained by your husband at the time of his death ?

(c) Particulars of children under 14 years of age.

BLOCK LETTERS Surname.	Other names.	Date of birth.	Sex.
1.			
2.			
3.			
4.			

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(b) If not, give particulars.

15. Has the deceased seaman left behind any other widow or widows than you. If so, give particulars.

For Parents or other dependants of seamen only.

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18. Is your wife/husband alive and living with you ?

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(b) If so, is the incapacity due to age or infirmity ?

(c) If infirmity, state its nature and attach a medical certificate in support of your claim.

0. Have you or any other member of your family ever claimed or received pension in respect e deceased ? If so, give particulars.

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I HEREBY DECLARE that to the best of my knowledge and belief the above answers are true and complete and I claim pension/allowance under the appropriate Regulation on the basis of the facts set forth above. I undertake to furnish any further particulars that may be required by the Ministry of Pensions. / Government of India.

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.....Signature of claimant (or left thumb impression).

.....Witness to Signature.

.....Address of Witness.

Declared and subscribed before me this day of 194 .

Signature of a Magistrate or Commissioner for Oaths or other District Official.....

.....

Address.....

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NOTE.—In the case of widows the birth and marriage certificates and in the case of children, birth certificate should be attached, if available. In other cases certificates proving the relationship (if any) of the Claimant to the deceased should be attached.

Second Signature of Claimant.....

Ministry of Pensions Ref. No.....

Government of India Ref. No.....

MGIPC—S2—II-59—22-7-43—1,000.

Appendix F. G.—1]

SUBJECT.....

.....

.....

Section War

File No. 66-43.

Serial No. 6.

Diary No. of letter replied to.....

General and Revenue Secretariat

( )

the *194* .

Date of issue 27-10-43

Signed by Mr. [illegible]

List of enclosures.....

Copied by.....

Examined by.....

No. Pol. 822

To The Assistant Resident at Bidar.

Compensation to Dependants of Indian Seamen killed by enemy action. Deck Passes. Salimuddin Khaja Sir.

With reference to your letter No F. 743/w d 20th Oct 43 on the above subject. I am directed to state that there is no P.O in Mysore of the Name of Aryanoor and to request that the Correct Name of the place may be furnished to facilitate enquiry.

I have

for 27/10/43

For Chief Secretary to Govt